Faith, Fertility, and the Field Economist

Dr Sriya Iyer was awarded a British Academy Postdoctoral Fellowship (2000–2003) to work on ‘Religion, inequality and fertility in South India’. Below, she describes one aspect of her research:

‘The number of micro-level social anthropological studies is continually growing. Many of these concentrate on what to the economist may appear odd aspects of society such as ritual and religion … and to which he pays little or no attention. For instance, an understanding of the complex of Hindu religious beliefs as they operate at village level … is directly relevant to the problem of developing India’s economy.’


Religion and reproduction are often at the centre of economic and political debate. In India, Hindu politicians have been actively contributing to this debate with strident declarations in recent months about the influence of the Islamic religion on the demographic behaviour of India’s Muslims. Demographic decisions such as how many children a couple should have and whether or not they should use contraception, may be affected both by economic factors and by non-economic factors such as religion. This is the subject of the research under study, and in keeping with a tradition more common among anthropologists than among economists, an interdisciplinary framework is used in order to evaluate how these demographic decisions are being made in India today. The main finding of the research is that the effect of religion on demographic decision-making in India is not significantly different between religious groups, once we have taken into account differences in their socio-economic status.

In terms of distribution, Hindus form approximately 82% of India’s population and Muslims constitute about 12%. There is a difference of one child per woman on average, in the demographer’s measure of the total fertility rate between Hindus (3.3) and Muslims (4.4) at the national level. Age-specific fertility also shows that Muslims are bearing larger numbers of children at earlier ages than are Hindus in India, although there are pronounced regional demographic differences (fertility rates are lower in the southern states compared to the north). That Muslims depict at the mean the highest fertility of any religious group in India is not at issue; what is arguable is whether we can attribute this solely to the influence of theology. In theory, there are many avenues through which religion can affect demographic behaviour. The first is through a ‘pure religion effect’ which suggests that the intellectual content of religion or theology influences fertility. An alternative view is that fertility differentials between religions are the result of differences in the socio-economic characteristics of individual members of different religions, reflecting differences between them in income, educational levels or minority group status. Religious groups may also have differential access to education or health services, which may be due to their political or economic status.

Does the textual theology of Hinduism and Islam have different implications for demography? In order to answer this, a scholar of demography needs to consult a range of sources – the Koran and the Sharia (or Islamic law), Hindu religious texts such as Vedas, epic poems such as the Ramayana and the Mahabharata, verse poems in praise of Hindu goddesses such as the Lalitasahasranama, and social commentaries such as Kautilya’s Arthasastra. A careful reading of this literature shows that specifically in the context of India, Hinduism and Islam display many similarities, particularly with respect to marriage, the position of women and the role for children. Where the two religions differ most is on religious attitudes towards birth control – in Hinduism there is largely a lack of scriptural injunction with respect to birth control, which may mirror Hindu religious attitudes towards ‘purity and pollution’. In Islam, there are considerable differences in theological attitudes towards birth control which are derived from different schools of Islamic jurisprudence, leaving considerable room for alternative interpretations at a practical level. From a theological perspective therefore, the effect of these two religions on fertility in India may not be significantly different from each other. And yet how does the economist reconcile the observed differences in demographic outcomes? She does so by examining economic circumstances and the role of religious institutions.

There is a distinguished tradition of scholars of South India, such as M. N. Srinivas, C. Chandrasekhar and J. C. Caldwell, who have
explored systematically the religious, demographic or economic circumstances of erstwhile Mysore state, what is now modern Karnataka. Among them are T. S. Epstein and P. Hill, the original ‘field economists’ of South India, whose research combined the anthropologist’s regard for detail with economic reasoning. In order to investigate the links between religion and demography in the present study, the approach of the field economist was preferred. A detailed micro-level study was conducted of a population of 201 rural Hindu, Muslim and Christian households who lived in 5 villages and the town of Ramanagaram in Ramanagaram taluk in Karnataka. Ramanagaram was an interesting test-case for several reasons. A significant proportion of the population are either Hindu or Muslim. Women and children of all religions are employed in the silk industry which dominates the entire area. Ramanagaram is also fascinating since it has witnessed for over half a century, the inception and execution of policies related to the family planning programme in India (the first family planning health centre was started here in 1952). Using a two-stage quota sampling technique, 111 Hindu, 75 Muslim and 12 Christian households were selected. A combination of research methods were employed to collect information – detailed questionnaires, participant observation, and group discussions conducted in 5 languages (Kannada, Hindi, Tamil, Telugu and English) depending on individual or group preference. The Ramanagaram sample revealed considerable demographic differences between religious groups – consistent with national and state-level estimates, on average the Muslims here also had one child more than the Hindus.

Are these differences in fertility at the mean upheld after controlling for socio-economic status? The quantitative component of the research involved testing, for the Ramanagaram sample, whether religious differences in marriage age, contraceptive choices, and fertility could be accounted for in terms of differences in the socio-economic characteristics of religious groups. Using econometric methods, it was tested whether religion had an impact on fertility, after controlling for a range of socio-economic characteristics – these included individual characteristics such as education, income or occupations; family characteristics such as consanguinity (whether the woman had married a blood relative), the influence
of female extended family and son-preference; and household characteristics such as access to water and fuel infrastructure. The most crucial finding of the research was that religion does not exercise a pure ‘theological’ effect in this population in South India. Compared with religion, education both for women and for men was more important for fertility in Ramanagaram. A particular focus of the econometric research was also to establish whether the effect of different socio-economic characteristics acted differently for the religious groups, and it was observed that this was indeed the case. For example, the effect of education influenced Muslims to a greater degree than Hindus and Christians. Son-preference was predominant among Hindus compared to other religious groups.

These quantitative findings are also mirrored in qualitative information collected in Ramanagaram. The research examined how women translated the textual theology of Hinduism and Islam, and whether this was significant for their marriage, contraceptive choice, and fertility decisions. Several interesting findings emerged – for example, ‘God’s will’ was not an important direct reason for marriage. Women considered 15 years to be the ‘normal’ female age at marriage, which is lower than the minimum legal age of 18 years. Remarriage and divorce were not regarded as feasible either by Hindu or by Muslim women, even those widowed at a very young age. In many situations, the textual theology of Islam and Hinduism was irrelevant, because women in this region were guided more by local norms. Questions on religion and birth control yielded interesting differences across religious groups. The perception among Muslim women in Ramanagaram was unambiguously that Islam does not permit birth control. Yet one-third of Muslim women disagreed with the position of their religion on contraception. Muslim women also explained that any specific religious opposition to contraception was mainly towards permanent contraceptive methods. By contrast, Hindu women expressed the view that Hindu priests were rarely consulted on matters related to birth control. Over one-third of women in the sample wanted another child, but religion was not viewed as a significant factor in this decision. While these qualitative data from Ramanagaram support the quantitative findings, they also illustrate that any observed religious differences in fertility outcomes may depend on different interpretations of scriptural content and adherence by individual Hindus and Muslims in real-life situations, reinforced by religious institutions such as the clergy. Taken together, these quantitative and qualitative findings have important implications for population policy. They suggest, for example, that Muslim women’s and men’s education in Ramanagaram needs more emphasis, while Hindu attitudes towards son-preference can be counteracted by media campaigns. Family planning needs to be made more reliant on temporary methods, particularly in minority areas. It may be worthwhile also to enlist the help of religious leaders to enforce the minimum legal age at marriage. Differences in the socio-economic characteristics of religious groups may account for religious differences in fertility outcomes between them. The influence, however, exerted by the local Islamic and Hindu clergy on individual Muslims and Hindus, cannot be ignored.

The quest to unravel the links between religion, economic circumstances, and human fertility needs to be undertaken in India and in other societies characterised by religious pluralism. It seems reasonable to combine quantitative analysis of sample data with qualitative evaluations of the textual theology of religion, and the manner in which individuals and institutions interpret it at a local level. An appreciation too of the approach of the field economist would allow a more informed understanding of these concerns. In so doing, the influence of faith on fertility might not prove as pervasive as previously conceived.

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Silk-reeling industry, Karnataka